

Insurance!
Life - Manual of

SURGEON GENERAL'S OFFICE
LIBRARY

Section **STATISTICAL SECTION**

Form 113c
W. D., S. G. O.

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The Prudential Insurance Co. of America
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MUTUAL ♦ BENEFIT

OFFICE.

ORGANIZED 1845.

CHARTER PERPETUAL.

AMZI DODD, President.

JAMES B. PEARSON,	-	Vice-President.
EDWARD L. DOBBINS,	-	Secretary and Treasurer.
B. J. MILLER,	-	2d Vice-Pres't and Mathematician.
AMZI DODD,	-	Counsel.
FRANCIS K. HOWELL,	-	Associate Coun'sel.
WILLIAM S. DODD,	-	Attorney.
J. WM. JOHNSON,	-	Ass't Secretary.
SAMUEL W. BALDWIN,	-	Ass't Treasurer.

MEDICAL BOARD.

EDGAR HOLDEN, M. D. GEO. A. VAN WAGENEN, M. D.
JOS. C. YOUNG, M. D.

Paid Policy-holders since Organization in 1845:

Policy Claims, - - - - -	\$73,757,256.98
Dividends, - - - - -	45,380,975.14
Surrendered Policies, - - - - -	18,826,084.50
Total, - - - - -	\$137,964,316.62

Assets, Market Value,	-	-	\$55,664,388.30
Liabilities, N. Y. and Mass. Standard,	51,813	853.55	
Surplus,	-	-	\$3,850,534.75

JANUARY 1, 1895.



DIRECTIONS

TO THE

MEDICAL EXAMINERS

OF THE

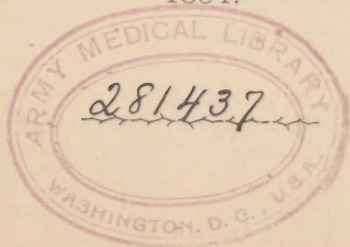
Mutual Benefit Life Insurance Company,

IN THE

SELECTION OF APPLICANTS

FOR INSURANCE.

1891.



NOTE 1.

In every instance where an applicant for insurance is presented to you for examination and you do not approve him or if you wish to examine him again before decision, sign and mail to the Home Office a slip, of which the following is a copy: Report every case.

*I have this day examined Mr.
.....of the town of.....
State of.....and have advised that
(here add what you advise, whether to postpone
for farther examination, or to reject or to con-
ditionally approve.)*

Cards will be provided you for this purpose from the Home Office, upon application.

NOTE 2.—FEES.

The fee allowed by the Company includes Fees. any charge for examination of urine, (except that by microscope, where the amount of insurance equals or exceeds \$10,000. For this, an additional fee of \$5 is allowed.)

No extra fees for mileage or detention are Mileage. allowed by the Company. Any claim for such must be a purely personal matter of agreement with the Agent.

To facilitate the payment of fees, you are Bills. requested to forward, by mail, to the Company's office at Newark, N. J., all your bills for examinations. As soon as each bill is approved, the company's check will be sent in payment. Agents will not be authorized to receive or pay bills for medical examinations.

NOTE 3.

Make no bargains that may affect your decision or judgment.

It is contrary to the rules of the Company for an Examiner to accept an appointment, as part of a bargain, to gain his own insurance or that of his friends. We do not exact of Examiners the soliciting of insurance, although we appreciate their influence in behalf of the Company. If employed by other companies, a strict neutrality is expected in their intercourse with applicants.

Removals.

An Examiner* who removes to another place forfeits his appointment, and if he is to be continued, a new appointment by the Company is necessary. *An applicant must be examined in the town where he resides or does business, and by the examiner for that town.*

NOTE 4.

Cause of rejection not divulged by the Company.

Causes for rejection are not disclosed by the Company, even to its agents.

NOTE 5.

We desire to insure only sound lives. "*As good as the average,*" means the average of sound lives, and not the general average.

Date.

1. Date your examination *always* on the day it is made.

Insist on examination in private.

Do not attempt to examine a man amid noise and confusion.

Insist upon being alone, and in quiet with the applicant.

Take the pulse first.

2. Endeavor to put the man at his ease by entering into conversation with him, and if he is not flurried or come in from violent

exercise, feel and count his pulse, quietly and without ostentation. If he appears excited and the pulse shows undue rapidity, wait till later in the examination, and take the opportunity to question him in a general way as to any illness he may have had.

3. Take an estimate of the man's condition by the signs familiar to physicians, such as complexion, gait, general manner as to snap and vigor, &c. Note any puffiness or pallor, distended or tortuous blood vessels (which may indicate concealed disease or depraved habits); in fact, look at the man as if you, personally, were about to stake a large sum on his chances of long life.

General estimate of an applicant.

4. While courteous and affable, be fearless, and independent of all suggestion, as you are responsible to the Company only, and not to any of its subordinates.

Responsible to the Company only.

You are not employed by, nor paid by an applicant, and if you make any unfavorable discoveries you are not bound to give the fact to him; but never fail to declare such to the Company, and your confidence will be protected. The record of an unfavorable opinion is well worth to the Company the fee paid.

Not bound to tell an applicant what you find.

5. Read carefully the printed notes on your page of the application.

6. Ask each and every question, and write the answers clearly and in such terms as will enable the Medical Board to weigh their significance. These answers are a part of the Contract of Insurance, and the medical

Each question is important and is the result of much thought and experience.

officers of the Company must not only have your final opinion of the risk, but be able to weigh the answers on which your opinion is based. We deem those relating to spitting of blood, rheumatism and dyspepsia as of special importance. Ascertain and state all the facts with relation to them.

No evasive answers.

7. Permit no evasive answers to the list of diseases given, and see to it that the dates of occurrence are given clearly.

No indefinite terms in family record.

8. Do not write down symptoms nor indefinite terms as causes of death in the family—such as dropsy, debility, result of accident, childbirth, etc.

Do not accept the answer "don't know," but question closely, and you may be able to decide what actual disease existed.

If the applicant really does not know, and has surviving relatives, he should ascertain the facts from them, or his application will be held at the Home Office, and correspondence and delay result.

Personal examination.
Appearance.

9. In making the personal examination, remember you are to decide not only whether the man is sound, but whether he will continue sound and reach his expectancy; and, in this connection, any indication of deteriorated health or impaired vigor is important.

Hernia.

10. Question as to hernia, and if the answer is "yes," examine it and see whether a proper truss is worn. If the truss cannot be worn without pain, determine whether the hernia is irreducible or incarcerated, and state the facts.

11. If he has had Syphilis or Gonorrhœa, Syphilis and Gonorrhœa. *do not let it appear on the application above question 17, where the party signs*, for it would be copied in his policy, but give the date ; and as to Syphilis, give the extent of development, stating whether primary, secondary or tertiary, with the particular manifestations experienced, in a note at the bottom of your certificate. (This may be done privately by letter to the Medical Board, if desired, but the letter *must be mailed on the day* of the application.)

12. If he has been away for his health, Absence for health. satisfy yourself as to the condition that demanded it, and state same clearly.

See whether he has a good vaccination scar. Vaccination. If not, he must either be re-vaccinated, or the Company can insure only with a clause exempting from liability in case of small-pox.

13. The matter of indulgence in alcoholic or malt liquors is one of vital importance in estimating the chances of prolonged life. Indulgence in malt or spirituous liquors. We do not require total abstinence, but we do insist that a man to be insurable must not frequently nor habitually stimulate with alcoholics, nor frequently overtax his stomach, liver and kidneys with malt drinks.

Do not accept the answer "an occasional drink." Assure yourself and us as to the actual number of drinks daily, and the kind. Excess means, in our vocabulary, intoxication in any degree and at any time, and the facts should be stated, either in the application or by letter. As almost every man addicted to

importance conceals or palliates the faulty oblique his appearance, his eyes, his complexion, his breath, and question adventitiously and in a commonplace way, so as to determine the extent of indulgence. We do not simply wish to guard against delirious tremors, but against diseases of the liver, kidneys and stomach, that grow out of the insidious ravages of alcohol.

If he uses Opium, Chloral or Cocaine, state the facts in full.

14. For auscultation and percussion, always remove the outer clothing from the chest, and either remove the starched shirt or roll it on so as to make a thorough examination of both lungs and heart. A *private patient* would not think you had done him justice without this, and to a company it is far more important, since you are searching for hidden or incipient disease.

In percussion, be sure that the note is not flat or high-pitched, nor over resonant—that there are no localities of dullness; and in auscultating, examine the apices of the lungs in the subclavicular, post- and supra-scapular regions with special care. If you find purring stridor, inequality of the two sides of the chest, pleuritic adhesions, cicatrices from old pneumonias, state the fact. Measure the chest, both on inspiration and expiration, with a tape line, as also the abdomen, with accuracy; for a comparison of the two is always made at the Home Office.

15. Examine the Heart without any cloth covering save a soft undershirt, or, if per-

mitted, without this. You cannot otherwise detect the faint murmurs that some brother physician may later detect, to your discredit.

Do not be satisfied to listen alone for murmurs over the aortic and pulmonary and mitral valves, but note the rhythm—whether there exist muffled or accentuated valve sounds. Note the impulse against the chest walls, and any evidences of enlargement of the heart, whether by dilatation or hypertrophy. Give the pulse rate at this stage by actual count, and note particularly whether soft and compressible, or whether there is a hard cord-like feel, indicating high arterial tension, (a condition, as you know, frequently associated with Bright's disease of the kidneys).

Character of Pulse.

16. An examination of the Urine for albumen and sugar is now required in all cases. This need be no formidable thing—a few clear test tubes, a graduated glass, an alcoholic lamp, a urinometer, concentrated nitric acid, and Fehling's Solution, with some litmus paper and a small glass pipette, are all that are essential to the ordinary examination. Ask whether the applicant passes more or less than a normal quantity (two or three pints in 24 hours), and whether he is obliged to rise in the night for the purpose.

Examination of Urine.

Have the applicant pass the urine in your presence. Stand it in cold water or aside till nearly or quite cold, and take the specific gravity. Do not take the specific gravity while the specimen is hot. Test with litmus paper. Filter the urine if turbid.

Test for Albumen.

Pour into a test tube enough nitric acid to bring its level just above the rounded bottom of the tube, and add the urine drop by drop with the pipette until there is a little more urine than acid, but avoid shaking or disturbing the liquids. Hold the tube against some dark object and see if there is the white line which indicates albumen. This would appear at the junction of the two liquids. If slightly above this line, state the fact in your report. If the result is doubtful, try again, and also use the boiling and nitric acid test, or slightly heat the cone of white, and observe whether it intensifies or disappears, and report. If the specific gravity is as high as 1025, make test for sugar; or do this at any rate, if the applicant confesses to passing large quantities of urine.

Test for Sugar.

Fehling's test is considered satisfactory. (An exceedingly reliable solution, in two parts is sold, with directions, by Dr. E. E. Squibb, the celebrated chemist of Brooklyn, N. Y.) Pour into a clean test tube one or two drachms of the solution, which must be clear and free from sediment, and boil this slowly over the alcohol lamp. If it will clear, with no deposit, add the urine with the pipette slowly, and again boil. As much urine may be added as you have of the blue solution. If the reddish sediment quickly forms, no further trial is necessary; we could not invert. If there is no immediate sediment after thorough boiling, stand the mixture aside for a few hours before making your final report. If you cannot obtain a reliable Fehling's Solu-

tion, use the following, considered by Prof. Flint as absolutely certain :

“Make a solution in the proportion of 95 grains of sulphate of copper to a fluid ounce of distilled water, and keep for use.

Make a solution in the proportion of 379 grains of neutral tartrate of potash to a fluid ounce of distilled water, and keep for use.

Make a solution of caustic soda in distilled water of a specific gravity of 1.12, or $16\frac{1}{2}^{\circ}$, Baumé, which can be prepared by any competent pharmacist, and keep for use.

Mix the above solutions for use in the following proportions : Take half a fluid drachm of the solution of copper; add half a fluid drachm of the solution of tartrate of potash; add of the solution of caustic soda sufficient to make three fluid drachms. Put a quantity of the mixture in a clean test tube to the depth of about three-quarters of an inch. Boil the test liquid, and when it is hot add the urine, drop by drop.

If there be sugar in the urine the applicant is not insurable. When sugar is found, the urine is usually of high specific gravity. It is excessively rare to find sugar in urine that has a specific gravity of less than 1020. Diabetic urine generally has a specific gravity of from 1035 to 1045.”

As to the microscopical examination of the urine, required where the total insurance will reach \$10,000, we need give no directions, since if sufficiently adept to use the microscope you will require none ; but we would say that you should be sure that the urine was

Microscopical
examination.

passed by the applicant, and that it should stand from eight to twelve hours, at least, for deposit, and that examination with an objective giving at least 350 diameters is desirable. *If you doubt your own skill or have no microscope, submit the specimen to one who is expert, as you cannot conscientiously charge the fee we allow without a faithful examination.*

Final answer.

17. In rendering your opinion in answer to the final question on your certificate be explicit, or write us at once why you cannot be so.

Report fully upon any of the following if found :

AMPUTATION : Give point of amputation and whether result of disease or injury ; the condition of the stump, and whether an artificial limb can be worn.

ACNE OR ALOPECIA.

ARTHRIS : Give frequency, character, duration, and length of time since cure.

BLADDER IRRITATION.

CALCULUS OF COLIC : (H) Calculus was very recent, recent ; Give dates and number of attacks, stating whether renal, hepatic or intestinal.

CATABOLIC : Give cause and duration, and be assured there is not diabetes.

CATARH : Give character, severity and duration.

CURVATURE OF SPINE : Report whether slight, and whether angular or lateral. (This is usually a cause for rejection.)

DEAFNESS : Give extent.

DEPRESSION OF CRANIAL BONES : Describe fully.

DIARRHOEA : (If frequent, reject.) Give full particulars.

DISCHARGE FROM EARS : Give particulars as to origin, duration, and whether there has been disease of the middle ear and interval since cure. (See causes of rejection E)

DISCOLORATION OF SKIN : Whether from affection of the liver or Addison's disease of supra renal capsules. (If the latter, reject.)

DIMNESS OF VISION : The reason, and whether of recent or rapid development.

FISTULA : Give date of cure and duration of the trouble. (If present, reject.)

HEADACHES : If frequent or severe, give the facts.

LAMENESS ; Give cause and duration.

NUMBNESS OR TINGLING IN LIMBS. (Give date and interval since recovery.)

OCCUPATION : If hazardous or unhealthy, state the facts.

RHEUMATISM : Give full particulars.

RINGING IN THE EARS : Give full particulars.

SPITTING OF BLOOD : This is one of the most frequently concealed, as it is one of the most important points in a record. Remember that even when significant of incipient tuberculosis, nine out of ten will insist that the blood came from the gums, throat or nose. Give the number of times, with intervals, and the actual

quantity, with date of loss. It is usually a cause for rejection.

WEIGHT: Very tall, very heavy, very light people are not good risks. It greatly above or below the following table of averages, state whether there has been recent or rapid gain or loss, and give the usual weight.

Table of averages of height and weight

5 feet....	115 pounds.
5 feet 1 inch....	120
5 feet 2 inches...	125
5 feet 3 inches ..	130
5 feet 4 inches...	135
5 feet 5 inches...	140
5 feet 6 inches...	143
5 feet 7 inches...	145
5 feet 8 inches...	148
5 feet 9 inches...	155
5 feet 10 inches..	160
5 feet 11 inches..	165
6 feet.....	170
6 feet 1 inch....	175
6 feet 2 inches...	180

We desire to insure only sound lives, and existing disease objects; nevertheless, there are disorders which occupy in some minds a middle ground. These, however, with certain family tendencies and occupations, almost always result in rejection if presented in the Home Office. The most prominent of these are given as follows:

FAMILY.

Consumption in several members of family.

Consumption in both parents, if applicant

is under 40 ; in one parent, if applicant is under 30. (Short endowments granted).

Consumption in one member, if applicant is under 20.

Heart disease in more than one member of family. (Endowments granted in early life.)

Bright's disease in more than one member of family. (Sometimes endowments granted.)

Insanity in more than one member of family. (Not invariably a ground for rejection.)

Cancer in more than one member of family. Sometimes policies are granted where two cases have occurred *in females*.

Apoplexy or paralysis, in more than one member of family. (Endowments sometimes granted in early or middle life)

OCCUPATIONS WHICH BAR INSURANCE.

1. Balloonists.

2. Electrical workers, repairers, linemen, and others exposed to special hazard from electrical currents.

3. Glass blowers.

4. Handlers of explosives or those engaged in unhealthful work or locality.

5. Retail liquor dealers, barkeepers, saloon-keepers, grocers with bar in their stores.

(Wholesale liquor dealers are limited to moderate amounts.)

6. Miners and all often or long exposed under ground.

7. Railroad employees, as follows : Brake-men, trackmen, employees on construction trains ; engineers and firemen of locomotives ; laborers in railroad yards ; freight conductors,

flagmen; all engaged in coupling or uncoupling cars; car inspectors.

8. Submarine workers.

PERSONAL CAUSES OF REJECTION.

1. Age below 14 or over 70.
2. Asthma, if present or recent.
3. Blindness.
4. Calculi, whether hepatic or renal, or occasional or recent.
5. Caries of bone, or necrosis.
6. Cough, frequent or habitual.
7. Curvature of spine.
8. Deafness, if very great.
9. Delirium tremens at any period.
10. Deformities of joints or body, if serious or general.
11. Diarrhoea, present or frequent.
12. Diphtheria, recent.
13. Dyspepsia, if present or frequent.
14. Ear discharges, occasional or continuous.
15. Enlarged glands.
16. Epilepsy.
17. Fistula, existing or recent.
18. Goitre.
19. Hernia, irreducible or incarcerated.
20. Hip-joint disease at any period.
21. Insanity.
22. Intermittent or irregular pulse.
23. Opium, chloral or cocaine habit.
24. Paralysis.
25. Prostatic enlargement.
26. Pulse below 50 or over 90.
27. Ulcerations, present or recent.

28. Stricture.

29. Ulcers.

30. Varicose veins above the knee.

31. Vertigo, if recent or frequent, and especially if applicant is over 45.

The following table shows the expectation of life for the different ages :

Age.	Expectation of Life.	Age.	Expectation of Life.
10...	48... ..	22.36
20... ..	42.20	49... ..	21.63
21... ..	41.53	50... ..	20.91
22... ..	40.85	51... ..	20.20
23... ..	40.17	52... ..	19.49
24... ..	39.49	53... ..	18.79
25... ..	38.81	54... ..	18.09
26... ..	38.11	55... ..	17.40
27... ..	37.43	56... ..	16.72
28... ..	36.73	57... ..	16.05
29... ..	36.03	58... ..	15.39
30... ..	35.33	59... ..	14.74
31... ..	34.62	60... ..	14.09
32... ..	33.92	61... ..	13.47
33... ..	33.21	62... ..	12.86
34... ..	32.50	63... ..	12.26
35... ..	31.78	64... ..	11.68
36... ..	31.07	65... ..	11.10
37... ..	30.35	66... ..	10.54
38... ..	29.62	67... ..	10.00
39... ..	28.90	68... ..	9.48
40... ..	28.18	69... ..	8.98
41... ..	27.45	70... ..	8.48
42... ..	26.72	71... ..	8.00
43... ..	25.99	72... ..	7.54
44... ..	25.27	73... ..	7.10
45... ..	24.54	74... ..	6.68
46... ..	23.80	75... ..	6.28
47... ..	23.08		

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